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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/509,377	08/28/2000	Sergey Matasov		9553

OFFICIAL

United States Patent and Trademark Office
Commissioner for Patents
Art Unit 3739
Examiner Mr. Leubecker, John P.
P.O. Box 1450, Alexandria VA 22313-1450
United States of America

EXAMINER	
LEUBECKER, JOHN P	
ART UNIT	PAPER NUMBER

3739

DATE MAILED: December 10, 2003
By FAX and MAIL

Dear Mr. Leubecker,

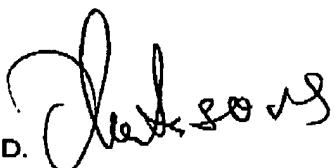
referring to Your request from December 2, 2003, herewith I sent the Credit Card Payment Form for payment of USD 450,- as extra claim fee added through multiple dependent claims from February 13, 2003.

Upon request of financial authorities I kindly ask You to officially acknowledge this payment with indication of correspondent clauses of Patent Laws.

Enclosed: Credit Card Payment Form 1 sheet

Faithfully Yours,

Sergey Matasov, M.D.



12/12/2003 AWONDAF1 00000012 09509377

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